	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 10-753,032												
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA (Column 1) (Column 2) TYPE OR SMALL ENTITY OR SMALL ENTITY												R THAN	
TOTAL CLAIMS			88				RA	Έ	FEE	7	RATE	FEE	1
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		FEE	385.00	ОЯ	BASIC FEE	770.00	1
TOTAL CHARGEABLE CLAIMS			8-8-	8 Eninus 20=		.68		9=		OR	X\$18=	1224	1
INDEPENDENT CLAIMS			(10	(minus 3 =		.8)=		-	X86≈	688	1
MULTIPLE DEPENDENT CLAIM P			PRESENT							ОЯ		700	1
• If the difference in column 1 is less than zero, enter "0" in column 2								5=		OR	+290=		
								AL		OR	TOTAL	2682	┨
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	LL (ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER .	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE] · ·
	Total	. 88.	Minus	-8	8	= 0	XS)a		ОЯ	X\$18=		İ
	Independent	• //	Minus	•**		= · ()	X43		-	OR	X86=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=			÷290=		
							10	TAL		OR OR	TOTAL	ļ	
5	5=//-07 (Column 1) (Column 2) (Column 3):						ADDIT. I	EE		Jon	ADDIT. FEE	<u> </u>	
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST ER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL EEF	
	Total	. 88	Minus	- 6	38		X\$ 9	7		OR	X\$18=		
	Independent	. 11	Minus		U_{\perp}		X43	7		OR	X86=	TI COLOR	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	_		OR	+290=		.
			•		•		TO	AL			YOTAL	•	
/0-/0-07 (Column 1) (Column 2) (Column 3)													İ
MENDMENT C	` '	CLAIMS REMAINING AFTER AMENDMENT		RIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA	RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	. 12	Minus	- 88	3		X\$ 9	.		OR	X\$18=		
	Independent	. 9_	Minus	/1			X43=	十		OR	X86=		
لــــ	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDENT	CLAIM	701		+					
* If the entry in column 1 to less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Peld For" IN THIS SPACE is less than 20, enter "20." **APPLY SEE													
•••(l the "Highest Nur I the "Highest Nur The "Highest Nurn	riber Previously (Paid For IN TH	S SPACE IS	less that	n 3. enter 3.*	ADDIT, FI	εL			DDM. FEE l	0	

Application or Docket Number